

Under the provisions of Section 413.031 of the Texas Workers' Compensation Act, Title 5, Subtitle A of the Texas Labor Code, effective June 17, 2001 and Commission Rule 133.305, titled Medical Dispute Resolution-General, and 133.307, titled Medical Dispute Resolution of a Medical Fee Dispute, a review was conducted by the Division regarding a medical fee dispute between the requestor and the respondent named above. This dispute was received on 6-10-03.

I. DISPUTE

Whether there should be reimbursement for CPT codes 99213MP, 97124, 97110, 97261, 99214MP and 99455RP.

II. FINDINGS

The respondent denied reimbursement based upon, "D – Duplicate Charge." Original EOBs were not submitted by either party to determine original basis of denial. The disputed services will be reviewed in accordance with the Commission's *Medical Fee Guideline*.

III. RATIONALE

DOS	CPT CODE	Billed	Paid	EOB Denial Code	MARS (Maximum Allowable Reimbursement)	Reference	Rationale
12-2-02 12-9-02 12-16-02 12-19-02 12-23-02 12-27-02 12-30-02 1-3-03 1-6-03 1-10-03 1-13-03 1-17-03 1-20-03 1-24-03	99213MP	\$55.00	\$0.00	D	\$48.00	Medicine GR (I)(B)(1)(b)	SOAP notes support billed service per MFG, reimbursement of 14 dates X \$48.00 = \$672.00.
12-2-02 12-6-02 12-9-02 12-16-02 12-19-02 12-23-02 12-27-02 12-30-02 1-3-03 1-6-03 1-10-03 1-13-03 1-17-03	97124	\$30.00	\$0.00	D	\$28.00	CPT Code Descriptor	Massage - SOAP notes support billed service per MFG, reimbursement of 16 dates X \$28.00 = \$448.00.

1-20-03 1-24-03 2-6-03							
12-12-02 12-23-02 12-27-02 1-3-03 1-6-03 1-10-03 1-13-03 1-20-03	97261	\$16.00	\$0.00	D	\$8.00	Medicine GR (I)(D)(!)	SOAP note does not support additional body area per Medicine GR (I)(D)(1). SOAP note indicates spine was adjusted. Therefore, no reimbursement is recommended.
12-12-02 2-6-03	99214MP	\$75.00	\$0.00	D	\$71.00	Medicine GR (I)(B)(1)(b)	SOAP note supports delivery of service, reimbursement of 2 dates \$71.00 = \$142.00.
11-29-02 12-2-02 12-9-02 12-19-02 12-30-02 1-24-03	97261	\$8.00	\$0.00	D	\$8.00	Medicine GR (I)(D)(!)	SOAP note does not support additional body area per Medicine GR (I)(D)(1). SOAP note indicates spine was adjusted. Therefore, no reimbursement is recommended.
12-16-02 12-19-02 12-27-02 1-3-03 1-10-03 1-13-03 1-24-03	97110	\$35.00	\$0.00	D	\$35.00/ 15 min	Medicine GR (I)(A)(9)(b)	SOAP note does not support one to one supervision per MFG, no reimbursement is recommended.
2-6-03	99455RP	\$75.00	\$0.00	D	\$50.00	Evaluation & Management GR (XXII)(D)(2)	A report to support reviewing of MMI or Impairment rating report was not submitted to support billing per MFG, no reimbursement is recommended.
TOTAL							The requestor is entitled to reimbursement of \$1262.00.

IV. DECISION & ORDER

Based upon the review of the disputed healthcare services within this request, the Division has determined that the requestor **is** entitled to reimbursement for CPT codes (999213MP, 99214MP and 97124) in the amount of **\$1262.00**. Pursuant to Sections 402.042, 413.016, 413.031, and 413.019 the Division hereby ORDERS the Respondent to remit **\$1262.00** plus all accrued interest due at the time of payment to the Requestor within 20 days receipt of this Order.

The above Findings, Decision and Order are hereby issued this 13th day of May 2004.

Elizabeth Pickle
Medical Dispute Resolution Officer
Medical Review Division